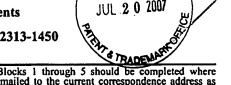
PART B - FEE(S) TRANSMITTAL

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WASHINGTON, DC 20007				(Depositor's name)			
							(Signature)
							(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTO	NAMED INVENTOR		KET NO.	CONFIRMATION NO.
10/706,917	11/14/2003		Weixin Gu		086142-05	81	7666
TILE OF INVENTION: HEAD-PROTECTING AIRBAG AND HEAD-PROTECTING AIRBAG DEVICE							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE ·	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TOTAL F	EE(S) DUE	DATE DUE
nonprovisional	NO ·	\$1400	\$300	\$0 87/23/8	SI 9 SADNDAF2 00	1700	07/25/2007 8764917
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS				
GOODEN JR, BARRY J		3616	280-730200	62 FC:1564 303.09 09			369.69 09
. Change of corresponde CFR 1.363).	nce address or indicatio	n of "Fee Address" (37	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Change of corresponded	ondence address (or Cha /122) attached.	ange of Correspondence					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent at	2) the name of a single firm (having as a member a egistered attorney or agent) and the names of up to registered patent attorneys or agents. If no name is sted, no name will be printed.			
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
TAKATA CORPORATION TOKYO, JAPAN							
Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
a. The following fcc(s) are submitted: 4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)							
Issue Fee A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.							
Advance Order - #	-		The Director is here	by authorized to char	rge the required fea	e(s), any def	iciency, or credit any
. Change in Entity Stat	us (from status indicate	d above)	/ overpayment, to De	posit Account Numb	er 19-0/41	(enclose an	extra copy of this form).
a. Applicant claims	SMALL ENTITY state	us. See 37 CFR 1.27.	b. Applicant is no l				
NOTE: The Issue Fee and naterest as shown by the r	Publication Fee (if requestroyed)	uired) will not be accepted ates Patent and Trademark	d from anyone other that Office.	n the applicant; a reg	istered attorney or	agent; or the	assignee or other party in
Authorized Signature	Mulace 1	O. Kabuse		Date	uly 20,	2000	<u></u>
Typed or printed name	Michael D. K	Caminski		Registration ?	No. 32,904	4	
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